

PAST PERFORMANCE QUESTIONNAIRE

This form will be completed by the EPA Evaluator. Answers to Questions 1-8 are based on information obtained from the following named client/reference, not the offeror. Ratings to be used are: Outstanding (O); Exceeds Expectations (EE); Neutral (N); Satisfactory (S); and Marginal (M). Ratings should be supported with the appropriate comments. Additional pages may be used, as necessary.

Name of Contractor:_____ Contract Number:_____

Contract Title:_____

Total Contract Value: _____ Period of Performance: _____

Name and Position of Contacted Reference: _____

Date Contacted: _____ Phone No.: _____

1. Quality of services/supplies Rating: _____

2. Timeliness of performance Rating: _____

3. Effectiveness of management (including subcontractors) Rating: _____

4. Initiative in meeting requirements Rating: _____

5. Response to technical direction Rating: _____

6. Responsiveness to performance problems Rating: _____

7. Compliance with cost/price estimates Rating: _____

8. Customer Satisfaction Rating: _____

9. Overall Performance Rating: _____

10. Name of EPA Employee: _____

11. Date: _____

12. Signature: _____